

**ANNOUNCEMENT OF THE DEPARTMENT OF LABOUR
PROTECTION AND WELFARE ON THE FORMAT OF
THE REPORT FORM ON THE ACCUMULATED RADIATION
QUANTITY MONTHLY OBTAINED BY EMPLOYEE**

By virtue of clause 7 of the Ministerial Regulations on the Standard for Administration and Management of Occupational Safety, Health and Environment in Relation to Ionizing Radiation, B.E.2547 (2004) stipulating the Director-General is to formulate the report form on accumulated radiation quantity monthly obtained by employee, the Director General, henceforth, issues this Announcement as follows:

Clause 1

This Announcement shall be called the "Announcement of the Department of Labor Protection and Welfare on the Format of the Report Form on Accumulated Radiation Quantity Monthly Obtained by Employee".

Clause 2

This Announcement shall come into force on and from the following date of its publication in the Government Gazette.

Clause 3

The arrangement of the Report Form on Accumulated Radiation Quantity Monthly Obtained by Employee in accordance with Clause 7 of the Ministerial Regulations on Standard for Administration and Management of Occupational Safety, Health and Environment in Relation to Ionizing Radiation, B.E.2547 shall comply with Form Ror.2 attached herewith.

Given on this 16th day of February 2005

(Mr. Surin Chirawisit)
Director General
Department of Labor Protection and Welfare

Disclaimer

This translation is intended to help Thais or foreigners to understand Thailand laws and regulations only, not to use as references, because it is only the original Thai version of legislation that carries legal effect. www.ThaiLaws.com, therefore, shall not be held responsible in any way for any damage or otherwise the user may incur as a result of or in connection with any use of this publication for any purposes. It's the responsibility of the user to obtain the correct meaning or interpretation of this publication or any part thereof from Thai version or by making a formal request to the appropriate or related authorities.

**Report Form for Accumulated Radiation Quantity
Monthly Obtained by Employee**

1) Name of Enterprise.....
 Address No.....Village No.....Lean/Alley.....Road.....
 Sub-district.....District.....Province.....
 Postal code.....Telephone.....Fax.....
 E-mail Address:.....

2) Name-Surname of Employee.....Sex:.....Age.....year
 Address No.....Village No.....Lean/Alley.....Road.....
 Sub-district.....District.....Province.....
 E-mail Address:.....Identification No.....

In Charge of this duty since.....(briefly identify the job description)

3. Experience on working with radiation

- Never work with radiation
 Ever work with radiation as follows:

No.	Working Period	Business Name	Job Description
1.			
2.			
3.			

4. Quantity of radiation obtained (following the Report on Radiation Monthly
 Obtained by the Employee certified and checked by the person responsible for
 technical operation on radiation)

Signature.....

(.....)

Person responsible for technical operation on radiation

Date.....

Signature.....Employer

(.....)